

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor of the subject matter that is claimed and for which a patent is sought on the invention entitled:

" Multidiameter Syringe Families "

The specification of which:

☒ is attached hereto.
☐ was filed on _____, as application serial no. _____, and was
amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby appoint the following attorneys and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Jon L. Roberts	Reg. No. 31,293	John K. Abokhair	Reg. No. 30,537
Kevin L. Pontius	Reg. No. 37,512	Christopher B. Kilner	Reg. No. 45,381
Timothy W. Graves	Reg. No. 45,940	Janeen Vilven	Reg. No. 47,156
Elliott Light	Reg. No. 51,948		

Send correspondence to:

Roberts Abokhair & Mardula, LLC
11800 Sunrise Valley Drive
Suite 1000
Reston, VA 20191

Direct telephone calls to:

Kevin L. Pontius
505-922-1400 and 703-391-2900

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and, further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Sec. 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full name of sole inventor: **Wilmer L. SIBBITT, Jr.**

Inventor's signature: _____

Date: _____

Residence: Albuquerque, New Mexico

Post Office Address: 338 Amherst Ave., NE

Albuquerque, NM 87106

Country of Citizenship: USA

(Declaration ends with this page)